

BARRON MEMORIAL MEDICAL CENTER SNF

1222 EAST WOODLAND AVENUE

BARRON 54812 Phone: (715) 537-3186

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? Yes

Number of Beds Set Up and Staffed (12/31/02): 50

Total Licensed Bed Capacity (12/31/02): 50

Number of Residents on 12/31/02: 47

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Non-Profit Corporation

Skilled

No

No

Yes

46

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)			%
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	29.8			
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years	53.2			
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years	17.0			
Day Services	No	Mental Illness (Org./Psy)	38.3	65 - 74	2.1	-----	-----			
Respite Care	No	Mental Illness (Other)	4.3	75 - 84	40.4	-----	-----			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	48.9	*****	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	4.3	95 & Over	8.5	Full-Time Equivalent				
Congregate Meals	No	Cancer	0.0	-----	-----	Nursing Staff per 100 Residents				
Home Delivered Meals	No	Fractures	10.6	-----	100.0	(12/31/02)				
Other Meals	No	Cardiovascular	2.1	65 & Over	100.0	-----	-----			
Transportation	No	Cerebrovascular	14.9	-----	-----	RNs	12.5			
Referral Service	No	Diabetes	2.1	Sex	%	LPNs	4.6			
Other Services	No	Respiratory	4.3	-----	-----	Nursing Assistants,				
Provide Day Programming for		Other Medical Conditions	19.1	Male	21.3	Aides, & Orderlies	43.1			
Mentally Ill	No	-----	-----	Female	78.7					
Provide Day Programming for		-----	100.0	-----	-----					
Developmentally Disabled	No				100.0					

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total Resi- dents	% Of All	
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%			Per Diem (\$)
Int. Skilled Care	0	0.0	0	2	5.9	133	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	4.3
Skilled Care	0	0.0	0	24	70.6	112	0	0.0	0	13	100.0	110	0	0.0	0	0	0.0	0	37	78.7
Intermediate	---	---	---	8	23.5	92	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	8	17.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		34	100.0		0	0.0		13	100.0		0	0.0		0	0.0		47	100.0

Admissions, Discharges, and Deaths During Reporting Period			Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02		

Percent Admissions from:			<div> <div> <div>Activities of</div> <div>%</div> <div>% Needing Assistance of</div> <div>% Totally</div> <div>Total</div> </div> <div> <div>Dependent</div> <div>Number of</div> </div> </div>		
Private Home/No Home Health	3.1	Daily Living (ADL)	Independent	One Or Two Staff	Residents
Private Home/With Home Health	3.1	Bathing	0.0	34.0	47
Other Nursing Homes	9.4	Dressing	0.0	72.3	47
Acute Care Hospitals	81.3	Transferring	2.1	70.2	47
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	0.0	70.2	47
Rehabilitation Hospitals	0.0	Eating	17.0	72.3	47
Other Locations	3.1	*****			
Total Number of Admissions	32	Continence	%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	8.5	Receiving Respiratory Care	10.6
Private Home/No Home Health	3.0	Occ/Freq. Incontinent of Bladder	68.1	Receiving Tracheostomy Care	0.0
Private Home/With Home Health	6.1	Occ/Freq. Incontinent of Bowel	40.4	Receiving Suctioning	0.0
Other Nursing Homes	6.1			Receiving Ostomy Care	0.0
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding	0.0
Psych. Hosp.-MR/DD Facilities	27.3	Physically Restrained	0.0	Receiving Mechanically Altered Diets	14.9
Rehabilitation Hospitals	0.0				
Other Locations	0.0	Skin Care		Other Resident Characteristics	
Deaths	57.6	With Pressure Sores	2.1	Have Advance Directives	66.0
Total Number of Discharges		With Rashes	12.8	Medications	
(Including Deaths)	33			Receiving Psychoactive Drugs	51.1

 Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities	All Facilties
	%	% Ratio	% Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.0	87.4 1.05	85.1 1.08
Current Residents from In-County	85.1	84.3 1.01	76.6 1.11
Admissions from In-County, Still Residing	34.4	15.2 2.26	20.3 1.69
Admissions/Average Daily Census	69.6	213.3 0.33	133.4 0.52
Discharges/Average Daily Census	71.7	214.2 0.33	135.3 0.53
Discharges To Private Residence/Average Daily Census	6.5	112.9 0.06	56.6 0.12
Residents Receiving Skilled Care	83.0	91.1 0.91	86.3 0.96
Residents Aged 65 and Older	100.0	91.8 1.09	87.7 1.14
Title 19 (Medicaid) Funded Residents	72.3	65.1 1.11	67.5 1.07
Private Pay Funded Residents	27.7	22.6 1.22	21.0 1.31
Developmentally Disabled Residents	0.0	1.5 0.00	7.1 0.00
Mentally Ill Residents	42.6	31.3 1.36	33.3 1.28
General Medical Service Residents	19.1	21.8 0.88	20.5 0.93
Impaired ADL (Mean)*	64.7	48.9 1.32	49.3 1.31
Psychological Problems	51.1	51.6 0.99	54.0 0.95
Nursing Care Required (Mean)*	5.1	7.4 0.68	7.2 0.70